

# CLAIMS ONLY

Application Number

10/536,694

Filing Date

Applicant(s)

7/10/17

7/10/17

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep		Depend		Indep		Depend	
1							51							
2							52							
3							53							
4	1	1					54							
5		1					55							
6		1					56							
7		1					57							
8		1					58							
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44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
Total							Total							
Indep	2						Indep							
Total	8						Total							
Depend							Depend							
Total	10						Total							
Claims							Claims							